CAMPAIGN CONTRIB	BUTIONS AND EXPENS	ES REPORT	Cer		State of Nevada
Name (pript)	STONE	e (if applicable)	SCM		District (if applicable)
395 -5	IRGEO UNIO		$\nu \nu$	8	S// O
Mailing Address (include city a	nd zip code)			Telephone No	138885
E-Mail Address				/	J000°
Select Appropriate Box(es)	CANDIDATE PAC	□BAG □P	OL PRTY IND E	XP NONPRO	FIT CORP
	AMENDED ANNU	IAI FILING 🗀 PE	TITIONERS WHO IN	TIATE/CIRCUI ATE	PETITION & RECEIVE
			REXPEND FUNDS IN		EIIION & NEOLIVE
	· · · · · · · · · · · · · · · · · · ·		8 8 4 Mgs 6		
Period: January 1,	Due January 15, 2006 2005 - December 31, 2005				
	ue August 8, 2006* 2006 — Aug 3, 2006				
	 October 31, 2006* 2006 Oct. 26, 2006		·		
Report #3 Due - Period: Oct. 27,	— January 15, 2007*/** 2006 — Dec. 31, 2006				
] Annual Filing – Period: January	Due January 15, 2007 1, 2006 – December 31, 20	006		FOR OF	FICE USE ONLY
* These Reports are ** Third Report suffic	filed by incumbents/cand es for 2007 Annual Filing	idates running if candidate al	for office in the so filed Report N	2006 election cy os. 1 and 2	
CONTR	BUTIONS SUMMARY				Cumulative From Beginning of
	THE SOMMAN			This Period	Report Period #1 through End of This Reporting Period
(See page 1 of instr		00	_	640.55	6405
(See page 2 of instr	•		_	0	0
party. (See page 2 of	•			0	0
4. Total Monetary Contrib (See page 2 of instruc	utions in the form of loans that w	ere forgiven		<u>a</u>	
		This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting		
5. Total Amount of Mon	etary Contributions		Period	/ 1	i
Received (Add Lines 1 through 4	(See page 2 of instruction sheet)			1 40 55	1/255
Total Amount of Writter	Commitments for		_	470.	670.
Contributions (When con contribution (monetary or in)	nmitment is funded, report as kindl)	_			
(See page 2 of instruction s 7. Total Value of In Kind	sheet)	4	-6		
	CONTIDUTIONS Received in (See page 2 of instruction sheet)	0	0		
	EX	PENSES SUMN	IARY		
	ses Paid in Excess of \$100			1./55	1.10
(See page 2 of instruc				400-	64020
Total Monetary Expens (See page 2 of instruction				ا م	Λ
10. Total Amount of All I				0	
(Add Lines 8 and 9)	(See page 2 of instruction she	et)		64052	6405
11. Total Value of In Kind	Expenses in Excess	D-		- / - 1	/ C
12. Disposition of Unspent	of instruction sheet) Contributions	-6			
(Only reported on Report	#3 , Annual Report or 15th				
day of the second month	after candidates defeat or		/		
incumbent does not run (See page 3 of instruction		<i>N</i> .	P		
l Declare Under Penal	ty of Perjury That the Fore	AFFIRMATION agoing is True	I and Correct.		
0 0		<u> </u>		_	
Kuym	How			7-27-	06
nature /	_			Date	D
01.doc	Revised: Sep-	-05	PAGE	OF	<u>ठ</u> _

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11/1	YNOPD	<u> </u>		•
Mama (min	Α			
Name (print	1)			

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	Amount of Each Contribution	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN IF DIFFERENT THAN CONTRIBUTOR
Raymond Stone 395 Sir George LV 89110	4/ 106	392.25	1		1/19
<i>)</i> (//	121.20	V	N/A.	1/1

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14

Name (print)

Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

ASSEM

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
	\	

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PAGE <u>3</u> OF <u>8</u>

ASSEM
Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	н
** Goods and services provided in kind for which money would otherwise have been paid	l
Other miscellaneous expenses	J

PAGE 4 OF 8

Revised: Oct-05

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

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RAYMOND STONE

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Signs R Us Detroit, MI	D	4/106	392.25
Home Depot Lamb & Charleston LV	D	4/106	121.50
C.C.E.D (Filing Fee) 505. Grand Central	J	5/ /06	26.8 <u>0</u> 100, <u>0</u> 0
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IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 RD PARTY IF LOAN GUARANTEED BY 3 RD PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
						

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PAGE 6 OF 8

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RAYMOND STONE

ASSEM

District (if applicable)

In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT
		
		$\overline{}$

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IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
,			

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362

page <u>8</u> of <u>8</u>